

UTILITY INTERRUPTION/DIGGING PERMIT REQUEST FORM
NAVEUR NAVSUPPACT NAPLES 11300/1 (TEST)

Date submitted: _____

From: _____
To: Public Works Department

Subj: **UTILITY INTERRUPTION PERMIT**

Ref: NAVSUPPACT NAPLES INSTRUCTION 11300.3C

1. Utility interruption is scheduled for _____.
(A minimum of ten working days advance notice must be provided.)

2. Utilities which will be affected are: _____

3. Valves/circuits/lines to be affected (Sketch(es) attached):

4. Building/Customers to be affected (if known): _____

5. Funding Cite/Job Order Number: _____
(Reimbursable Customers Only)

6. I _____ certify that the necessary coordination will be accomplished between the customers, contractors, and Public Works Department personnel prior to the interruption date. Additional coordination will be accomplished based upon recommendations returned by the Public Works endorsement.

Signature: _____

Endorsements:

PW MAINTENANCE DIRECTOR

Concur/Non-Concur

Name: _____

Signature: _____

Comments or Reason for Non-Concurrence: _____

To: _____

1. Comments as noted above.